Table 3. Profile of Persons served in the community mental health setting, State Psychiatric Hospitals and Other Settings

This table provides a profile for the clients that received public funded mental health services in community mental health settings, in state psychiatric hospitals, in other psychiatric inpatient programs, and in residential treatment centers for children.

Table 3.	1																		
Report Year:	2007																		
State Identifier:	IN																		
	4	\ge 0-17	Age 18-20			Age 21-64			Age 65+			Age Not Available			Total				
Table 3.			Not	Femal		Not	Femal		Not	Femal		Not	Fem		Not			Not	
Service Setting	Female	Male	Availa	е	Male	Avai	е	Male	Avail	е	Male	Avai	ale	Male	Availabl	Female	Male	Available	Total
Community Mental																			
Health Programs	11844	17811	0	1711	1316	0	30666	19565	0	2567	950	0	0	0	0	46,788	39,642	0	86,430
State Psychiatric																			
Hospitals	31	97	0	22	40	0	426	833	0	34	36	0	0	0	0	513	1,006	0	1,519
Other Psychiatric			_						_					_	_				
Inpatient	126	232	0	76	95	0	1484	1430	0	67	28	0	0	0	0	1,753	1,785	0	3,538
Residential Treatment	0=4	440				•						_				0=4			
Center for Children	254		0	0	0	0	. 0	0	0	0	0	0	0	0	0	254	412	0	666
Comments on Data (for	* Age is	* Age is calculated at the beginning of the fiscal year.																	
Age):													-						
Comments on Data (for																			
Gender):																			
Comments on Data																			
(Overall): Comments on Data	* The #0			ما میں داما	-:	-4-:		. for loalie		:	مده مطار		}						
(Overall, Continue):	* The reports shown on this website contain numbers for Indiana residents who are served by the Hoosier Assurance Plan (HAP) and do not contain numbers for all Indiana																		
	The HAP is the main method by which the Indiana Division of Mental Health and Addiction can fund community mental health services.																		
	As established by the Indiana Legislature, the HAP is designed to support and manage the delivery of behavioral healthcare services to individuals who are in a low income																		
	* Persons with a diagnosis of only substance abuse or mental retardation are not included																		
				· •				ing diagn	osis of	mental	illness a	and							
	substand * This re							ınity Serv	ices D	ata Syst	tem (CS	SDS)							
	and Crea	ative So	cioMedi	c's - Bel	navioral	l Heal	th Inforn	nation Sy	stem's	- Decis	ion Sup	port							

hospitals and community mental health centers during the same year and thus would be reported in counts for both rows.

Instructions:

- 1 settings as receiving services in state hospitals.
- 2 If forensic hospitals are part of the state mental health agency system include them.
- 3 Persons who receive non-inpatient care in state psychiatric hospitals should be included in the Community MH Program Row
 - Persons who receive inpatient psychiatric care through a private provider or medical provider licensed and/or contracted
- 4 through the SMHA should be counted in the "Other Psychiatric Inpatient" row. Persons who receive Medicaid funded inpatient services through a provider that is not licensed or contracted by the SMHA should not be counted here.
- 5 A person who is served in both community settings and inpatient settings should be included in both rows KTC: CMTIS has a standardized definition of KTC for Children: An organization, not necessed as a psychiatric nospital, whose primary purpose is the provision of individually planned programs of mental health treatment services in conjunction with residential care for children and youth primarily 17 years old and younger. It has a clinical program that is directed by a
- psychiatrist, psychologist, social worker, or psychiatric nurse who has a master's degree or doctorate. The primary reason for the admission of the clients is mental illness that can be classified by DSM-IV codes-other than the codes for mental retardation, developmental disorders, and substance-related disorders such as drug abuse and alcoholism (unless these are co-